

Part 1: High-Level Description of Possible Significant Change

The table below provides high-level information about the possible significant change, as submitted.

Tracking #	2027-017
Q6. Provide a short name for possible change	VBP Requirements
Q1. Which CCO Contract(s) will be impacted?	(c) Medicaid Contract
Q2. High-level description of possible change	Evaluate the need for changes to VBP requirements, including annual targets, care delivery area VBPs, PCPCH payments, and reporting (Exh H)
Q3. Which prioritized restatement category applies?	(a) CCO Deliverables and Performance & Quality Measures
Explain how change fits into "CCO Deliverables and Performance & Quality Measures" category	CCOs report progress towards VBP contract requirements through the annual VBP Data Template, VBP Questionnaire, and APAC Payment Arrangement File (PAF).
Q4. Could entire change be deferred to later contract year?	No
Consequence(s) if not included in 2027 contract	
Q5. Could change be reduced to smaller components so it's phased in over multiple contract years?	Yes
Which component(s) could be in later contract year(s)?	A discussion with CCOs is needed to determine whether changes are needed and for what years those changes would be most appropriate.
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Part 2: Information for Engagement

This should be completed by the responsible OHA unit. **Be specific yet clear and concise in your responses; use bullet points.**

Tracking #	2027-017
Short name	VBP Requirements

1. What is the specific issue that will be addressed by this change?

This should explain the current state and why it's an issue to be addressed.

We have received feedback that (1) providers are hesitant to take on downside risk in the current financial environment, (2) some CCOs would like additional flexibility around our care delivery area requirements, and (3) some CCOs would like to revisit the requirement that PCPCH payments increase annually (particularly for CCOs making higher PMPM payments at present).

2. What is the preliminary suggestion for how to address the issue?

This should align with the high-level description submitted for the change. Refer to Part 1: High-Level Description of Possible Significant Change. The final proposed change may differ from the preliminary suggestion as a result of OHA and CCO engagement.

We would like to consider possible changes to downside risk (3B+) requirement, care delivery area VBPs, and the requirement that PCPCH payments increase year over year. We would like CCO feedback in each of these three areas.

3. What knowledge and/or skills should CCOs consider when deciding which staff to work with OHA on this issue?

Value-based payment knowledge/expertise

4. Is there an existing meeting where OHA and CCOs can work – or are already working – on this issue? If so, identify the meeting and its schedule.

This work may require regular OHA-CCO engagement over a few weeks, possibly up to a couple months. If there is not a suitable existing forum, then OHA will hold a dedicated work session/s specifically for this purpose.

CCO VBP Workgroup sessions for CCO VBP staff scheduled for 3/31 and 4/7